

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 27592-00912-US								
<table style="width: 100%; border: none;"> <tr> <td colspan="2" style="border: 1px solid black; padding: 2px;">In re Application of Kamlesh Rath</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">Application Number 10/616,882-Conf. #2633</td> <td style="border: 1px solid black; padding: 2px;">Filed July 9, 2003</td> </tr> <tr> <td colspan="2" style="border: 1px solid black; padding: 2px;">For Scalable broadband wireless mesh access network</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">Art Unit 2633</td> <td style="border: 1px solid black; padding: 2px;">Examiner A. Gonzalez</td> </tr> </table>			In re Application of Kamlesh Rath		Application Number 10/616,882-Conf. #2633	Filed July 9, 2003	For Scalable broadband wireless mesh access network		Art Unit 2633	Examiner A. Gonzalez
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>540.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>22-0185</u>.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.</p> <p>I am the</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><input type="checkbox"/> applicant /inventor.</td> <td style="width: 40%; text-align: center;">_____ /Arlene P. Neal/ Signature</td> </tr> <tr> <td><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</td> <td style="text-align: center;">_____ Arlene P. Neal Typed or printed name</td> </tr> <tr> <td><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>43,828</u></td> <td style="text-align: center;">_____ (202) 331-7111 Telephone number</td> </tr> <tr> <td><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</td> <td style="text-align: center;">_____ April 16, 2009 Date</td> </tr> </table>			<input type="checkbox"/> applicant /inventor.	_____ /Arlene P. Neal/ Signature	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	_____ Arlene P. Neal Typed or printed name	<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>43,828</u>	_____ (202) 331-7111 Telephone number	<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____	_____ April 16, 2009 Date
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<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>										
<p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>										